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Some Remarks on Rheumatism

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of
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W. E. H.

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Some Remarks on Rheumatism

Rheumatism is placed by Dr Cullen in his first class Pyrexiae, Order the second Phlegmasiae. The characteristics of this disease as assigned by him, are pyrexia, pain about the parts following the tract of the Muscles, attacking the Knees and large articulations in preference to those of the feet or hands, increased by external heat.

To enter into a minute detail of this disease, or every circumstance which in the beginning exist — or afterwards may arise, calculated to influence the practice — even could I believe myself prepared for the undertaking, is not now my intention — nor does it seem atall necessary. I prescribe to myself a range of much less extent, and shall be satisfied in collecting into a condensed compass, a few observations of more general application. Rheumatism

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is divided by all practical writers into Acute and Chronic.

I shall confine my remarks to the first of these forms of the disease

Acute Rheumatism may arise at all seasons of the Year, but more particularly in the Spring and Fall, when the vicissitudes of weather are more frequent from heat to cold. It may attack persons at any period of life, though it seldom occurs till after the age of puberty.

Professor Chapman observes that he has seen it in very young Children, attacking especially the head, so as to give rise to the suspicion of the existance of Hydrocephalus Internus. But as mentioned above, persons, after the period of puberty, and the middle aged, are more liable to the disease than at any other time of life.

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No complaint attacks in a greater variety of forms than this. It generally fixes on the upper or lower extremities - though it by no means confines itself to those parts - on the contrary it attacks the loins, hips, heart, head and diaphragm, producing Lumbago, Sciatica &c. Besides these it has been known to attack the superfices of the body - the internal layers of muscles, and even the skin itself.

Causes. Acute Rheumatism generally arises, from those causes which produce Pneumonic inflammation and other diseases of a similar nature, such as the application of cold to the body when unusually warm, or when any part of it is exposed to the influence of cold, whilst the other parts are kept warm; particularly when it is applied by means of moisture, as wearing

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wet or damp clothing, sleeping in damp sheets, lying on the wet ground (particularly when sleeping) coming from warm crowded rooms into the cold air so as to check the perspiration, is a very fruitful cause of the disease. Besides these other causes may bring the disease into action— as violent strains, violent spasms and exertions— and in some there would seem to be a predisposition to take on the disease without any evident cause.

Symptoms. This disease, for the most part, comes on with symptoms analogous to those of other febrile affections— such as lassitude rigours, hot dry skin and restlessness, succeeded by loss of appetite, great anxiety and nausea, attended with a hard, full and quick pulse. When blood is drawn from a vein and coagulates, it exhibits an

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inflammatory surface. The tongue, in the beginning, is usually covered with white fur, as the disease advances, and when it becomes complicated with gastric irritation, it sometimes is incrusted with a dark brown matter. After a short time, severe pains are felt in different parts of the body - more particularly in the larger joints - sometimes the pain is confined to a few joints - in other cases it attacks many at the same time - shifting from one part to another, leaving redness, swelling and great tenderness to the touch.

Dr Cullen says, it seldom happens, that a swelling coming on does not relieve the pain of the part - But the swelling does not always take off the pain of the part intirely. There is an increase of fever

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towards evening, which continues, through the night, attended with considerable increase of pain. The face is sometimes flushed — though not generally so — the head in a great majority of cases, remains free from pain — though, sometimes, it is very severely affected — In most cases there seems but little tendency to delirium

The Stomach is not much affected — except when the disease occurs in those districts of Country subject to intermittent fever, and it takes on that form: then in many cases we have considerable derangement of that organ. The bowels are regularly constipated. In many cases sweating arises very early in the progress of the disease; but is seldom free or copious, & for the most part does not remove the pain or prove critical. In the course of the

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disease the urine is high coloured, and, in the commencement, without sediment- but, as the disease advances, the fever has more distinct remissions, and the urine deposits a lateritious sediment. This however, does not prove intirely critical; for the disease often continues a long time after the appearance of such sediment. As stated above, such are the symptoms that usually usher in and accompany this disease— But sometimes the local, precede the constitutional symptoms, for several days.

As regards the nature of the inflammation in this disease, I am much gratified to have it in my power to give it in Professor Chapmans own words. He says. "All those writers who have treated of this complaint, appear to consider it as a general case of

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Phlegmasiae, or in other words, a fever attended by local inflammation. That there is a very high degree of action in the affected part, cannot be denied – But it would appear, that as in Gout, the action to a certain degree is a peculiar one, having none or very few of the properties of Phlegmonous inflammation. Much as I have seen of this disease, only one instance has ever come under my notice of its terminating in suppuration producing, healthy pus. But, continues the Professor, I am not aware, that this peculiarity of inflammation, calls for any difference or modification of treatment; it requires the same remedies, as in the ordinary inflammatory affections.

Prognosis. When properly managed an attack of acute Rheumatism, may almost always

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be cured and seldom or never proves fatal, unless it attack some vital part. It sometimes runs into the chronic form & sometimes proves fatal. The symptoms indicative of convalescence are diminution of pain and fever, the skin becoming perspirable, the bowels become loose, and the urine deposits a sediment.

Dr Scudamore, in defining the seat of this disease, says "A less general mode of description, than that adopted by Dr Cullen appears to me required. The fibrous textures of the body, may be stated, as the true seat of Rheumatism, and most commonly, the tendinous structure is the part affected."

Rheumatism seldom proving fatal, few opportunities have offered of examining the parts after death. In the few, however, which have occured, the disease is seated in the joints or their appendages a thick

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Diagnosis. Rheumatism may be confounded with Gout. The diseases are, sometimes, so analogous as to embarrass the most experienced practitioners; - but may generally be distinguished by the following symptoms. Rheumatism generally occurs, in consequence of some evident cause - The Gout, without any such cause - Rheumatism has no antecedent complaint - Gout is preceded by symptoms of a depraved stomach - The seat of the one, is in the smaller joints and that of the other in the larger - The limbs in Rheumatism, though swelled, have not the bright colour as in Gout - After all however, the best diagnostic symptom, is that Gout always has its seat in the stomach - Rheumatism never as a primiary affection

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Treatment. As acute Rheumatism presents itself, in this climate, it is a disease of high inflammatory action, and calls for the whole antiphlogistic plan of treatment, at the head of which, most undoubtedly, stands bloodletting. This remedy is called for, by the whole train of symptoms, exhibited in the disease, and should be repeated so long as it is indicated by the state of the pulse, the severity of the pain, and the general strength & condition of the patient. Cases may occur, however, in which it will be right to limit the use of the lancet to one or two bleedings, and then trust the case to the plan of treatment hereafter to be mentioned. While we are depleting by the lancet, it will become necessary to recur to purging, and the best articles certainly are Calomel & the neutral salts - either alone

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or combined, as the nature of the case may demand, we should resort again to purging, at any time it may seem necessary.

I am aware that emetics have been very highly spoken of as a remedy in this disease — It would appear, however, that their use should be restricted to those cases, of the disease, occuring in Miasmatic Countries, and blended with intermittent fever — and here they act on a principle perfectly intelligible — they relieve the stomach of its foul contents, and prepare it for the reception of other remedies.

After the judicious employment of the remedies mentioned, we shall find in a majority of cases an abatement of the more violent symptoms. At this time, we resort to a set of remedies, which, by the universal consent of practitioners, are em-

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My allusion is to the diaphoretics - But, it is obvious, they can only be beneficial, when much direct depletion has been premised. It is a fact well established, that sweating is always injurious, if employed in the early stage of inflammatory Rheumatism - When it comes on spontaneously, it seldom affords relief - and very often aggravates the symptoms. When we resort to this class of remedies - it should be remembered that the milder kind are to be employed in the commencement - The best, under such circumstances undoubtedly are, the antimonial and nitrous preparations - These failing - or the disease not being removed - we call into our aid, remedies of a more stimulating nature - The best of which is Dovers powder - and when sweat-

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ing is once brought on, it should be continued and maintained for not less than twenty four hours. It is a good rule not to remit the remedy untill the disease is cured or very great relief is afforded. If the remedies employed fail, resort to warm beverages and to the use of the vapour bath - this last should always be employed - The Serpentaria Virginiana the Eupatorium Perfoliatum and the Pipsisewa should all be tried. The seminal Tincture of Colchicum is a remedy of vast importance in this disease. All these articles failing we should resort to mercury in combination with Ipecacuanha and opium - this is an invaluable remedy - with this I conclude my remarks on the general treatment of Rheumatism. Before leaving the subject I will say

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something on the local treatment, and diet.
No remedy is better calculated to relieve the painful affections of the joints than local blood letting - either by cups or by leeches, and when these have been urged far enough - a succession of blisters to the part so as to keep up a discharge for some time will be found of great benefit.
Cold applications have been highly recommended by the physicians of Russia. But general experience is against the practice, they have always been found to produce mischief.
To relieve soreness and stiffness of the parts which sometimes remain, after an attack of this disease, frictions with the hand or flesh brush - the warm bath - the warm salt bath - are excellent remedies, and should never be neglected.
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this disease (particularly the inflammatory) should be very light - consisting of the farinaceous articles - The patient should be prohibited from all animal food - and the use of all Spiritous & fermented liquors.